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SENATE BILL 481

49TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2009

INTRODUCED BY

Sue Wilson Beffort

AN ACT

RELATING TO HEALTH; REQUIRING THE INTERAGENCY BEHAVIORAL HEALTH PURCHASING COLLABORATIVE TO INCLUDE STATEWIDE SCREENING, BRIEF INTERVENTION, TREATMENT AND REFERRAL SERVICES THROUGH PRIMARY CARE AND SCHOOL-BASED CLINICS IN ITS PLAN FOR DELIVERY OF BEHAVIORAL HEALTH SERVICES AND IN ANY CONTRACT WITH A SINGLE ENTITY FOR BEHAVIORAL HEALTH SERVICES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

Section 1. Section 9-7-6.4 NMSA 1978 (being Laws 2004, Chapter 46, Section 8, as amended) is amended to read:

"9-7-6.4. INTERAGENCY BEHAVIORAL HEALTH PURCHASING COLLABORATIVE.--

A. There is created the "interagency behavioral health purchasing collaborative", consisting of the secretaries of aging and long-term services; Indian affairs; human

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1 services; health; corrections; children, youth and families;
2 finance and administration; workforce solutions; public
3 education; and transportation; the directors of the
4 administrative office of the courts; the New Mexico mortgage
5 finance authority; the governor's commission on disability; the
6 developmental disabilities planning council; the instructional
7 support and vocational [~~rehabilitation~~] education division of
8 the public education department; and the New Mexico health
9 policy commission; and the governor's health policy
10 coordinator, or their designees. The collaborative shall be
11 chaired by the secretary of human services with the respective
12 secretaries of health and children, youth and families
13 alternating annually as co-chairs.

14 B. The collaborative shall meet regularly and at
15 the call of either co-chair and shall:

16 (1) identify behavioral health needs
17 statewide, with an emphasis on that hiatus between needs and
18 services set forth in the department of health's gap analysis
19 and in ongoing needs assessments, and develop a master plan for
20 statewide delivery of services;

21 (2) give special attention to regional
22 differences, including cultural, rural, frontier, urban and
23 border issues;

24 (3) inventory all expenditures for behavioral
25 health, including mental health and substance abuse;

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1 (4) plan, design and direct a statewide
2 behavioral health system, ensuring both availability of
3 services and efficient use of all behavioral health funding,
4 taking into consideration funding appropriated to specific
5 affected departments; and

6 (5) contract for operation of one or more
7 behavioral health entities to ensure availability of services
8 throughout the state.

9 C. In any contract for operation of one or more
10 behavioral health entities, the interagency behavioral health
11 purchasing collaborative shall require statewide screening,
12 brief intervention, treatment and referral services through
13 primary care and school-based clinics and shall provide at
14 least eight hundred thousand dollars (\$800,000) per year for
15 such screening, intervention, treatment and referral.

16 [~~C.~~] D. The plan for delivery of behavioral health
17 services shall include specific service plans to address the
18 needs of infants, children, adolescents, adults and seniors, as
19 well as to address workforce development and retention and
20 quality improvement issues. The plan shall include specific
21 plans for statewide screening, brief intervention, treatment
22 and referral through primary care and school-based clinics.
23 The plan shall be revised every two years and shall be adopted
24 by the department of health as part of the statewide health
25 plan.

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1 ~~[D-]~~ E. The plan shall take the following
2 principles into consideration, to the extent practicable and
3 within available resources:

4 (1) services should be individually centered
5 and family focused based on principles of individual capacity
6 for recovery and resiliency;

7 (2) services should be delivered in a
8 culturally responsive manner in a home or community-based
9 setting, where possible;

10 (3) services should be delivered in the least
11 restrictive and most appropriate manner;

12 (4) individualized service planning and case
13 management should take into consideration individual and family
14 circumstances, abilities and strengths and be accomplished in
15 consultation with appropriate family, caregivers and other
16 persons critical to the individual's life and well-being;

17 (5) services should be coordinated,
18 accessible, accountable and of high quality;

19 (6) services should be directed by the
20 individual or family served to the extent possible;

21 (7) services may be consumer or family
22 provided, as defined by the collaborative;

23 (8) services should include behavioral health
24 promotion, prevention, early intervention, treatment and
25 community support; and

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1 (9) services should consider regional
2 differences, including cultural, rural, frontier, urban and
3 border issues.

4 ~~[E-]~~ F. The collaborative shall seek and consider
5 suggestions of Native American representatives from Indian
6 nations, tribes, pueblos and the urban Indian population,
7 located wholly or partially within New Mexico, in the
8 development of the plan for delivery of behavioral health
9 services.

10 ~~[F-]~~ G. Pursuant to the State Rules Act, the
11 collaborative shall adopt rules through the human services
12 department for:

13 (1) standards of delivery for behavioral
14 health services provided through contracted behavioral health
15 entities, including:

- 16 (a) quality management and improvement;
- 17 (b) performance measures;
- 18 (c) accessibility and availability of
19 services;
- 20 (d) utilization management;
- 21 (e) credentialing of providers;
- 22 (f) rights and responsibilities of
23 consumers and providers;
- 24 (g) clinical evaluation and treatment
25 and supporting documentation; and

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1 (h) confidentiality of consumer records;
2 and

3 (2) approval of contracts and contract
4 amendments by the collaborative, including public notice of the
5 proposed final contract.

6 ~~[G.]~~ H. The collaborative shall, through the human
7 services department, submit a separately identifiable
8 consolidated behavioral health budget request. The
9 consolidated behavioral health budget request shall account for
10 requested funding for the behavioral health services program at
11 the human services department and any other requested funding
12 for behavioral health services from agencies identified in
13 Subsection A of this section that will be used pursuant to
14 Paragraph (5) of Subsection B of this section. Any contract
15 proposed, negotiated or entered into by the collaborative is
16 subject to the provisions of the Procurement Code.

17 ~~[H.]~~ I. The collaborative shall, with the consent
18 of the governor, appoint a "director of the collaborative".
19 The director is responsible for the coordination of day-to-day
20 activities of the collaborative, including the coordination of
21 staff from the collaborative member agencies.

22 ~~[I.]~~ J. The collaborative shall provide a quarterly
23 report to the legislative finance committee on performance
24 outcome measures. The collaborative shall submit an annual
25 report to the legislative finance committee and the interim

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1 legislative health and human services committee that provides
2 information on:

3 (1) the collaborative's progress toward
4 achieving its strategic plans and goals;

5 (2) the collaborative's performance
6 information, including contractors and providers; and

7 (3) the number of people receiving services,
8 the most frequently treated diagnoses, expenditures by type of
9 service and other aggregate claims data relating to services
10 rendered and program operations."